

# CLAIMS ONLY

Application Number

10085240

Filing Date

Applicant(s)

\* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1			/			
2			/			
3			/			
4			/			
5				/		
6				/		
7			/			
8				/		
9				/		
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Total Indep			11			
Total Depend			11			
Total Claims			22			

	Indep	Depend	Indep	Depend	Indep	Dep
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Total Indep						
Total Depend						
Total Claims						